



INNOVATIVE TAX CREDIT DONATION FORM

YES! Please count me in with my donation toward Innovative Educational Programs for Kalispell Public Schools. I understand by submitting this form, along with my donation, that I am not guaranteed a dollar-for-dollar credit on my taxes as outlined in 2021's Montana House Bill 279, but that KPS will submit my donation for approval in the Montana Department of Revenue (DOR) Education Donations Portal. If my donation is accepted by the DOR, I will receive a receipt from KPS to submit with my 2025 taxes.

I am donating as a **BUSINESS** **INDIVIDUAL** (please check applicable box)

NAME: _____
Business Name if donating as a Business or First and Last if donating as an Individual

PHYSICAL ADDRESS: _____
Street

City, State, and Zip Code

MAILING ADDRESS: _____
Street or PO Box

City, State, and Zip Code

EMAIL ADDRESS: _____

Last Four Digits of your SSN (Social Security Number for Individuals) or FEIN (Federal Employer Identification Number for Businesses) : _____

Dollar Amount of Your Donation: _____

Please return this form with your donation to Kalispell Public Schools; attn: Innovative Education Tax Donation; 233 1st Ave. E.; Kalispell, MT 59901. If you have any questions, please contact Chris Campbell at (406) 751-3400, ext 3412 or chris.campbell@sd5.k12.mt.us.